

MEDICARE HHH J15 (15004) PRE-ENROLLMENT INSTRUCTIONS



WHAT FORM(S) SHOULD I DO?

- [J15 EDI Enrollment Agreement Form](#)
- [J15 EDI Application](#)

WHERE SHOULD I SEND THE FORM(S)?

- Fax form to (615) 664-5947; or
- Mail form to:
J15 – Home Health & Hospice
CGS
PO Box 20018
Nashville, TN 37202

WHAT IS THE TURNAROUND TIME?

- Standard processing time is 20 business days.

HOW DO I CHECK STATUS?

- Call the EDI department at (877) 299-4500 and ask if you have been linked to Office Ally's submitter ID CH15000020.
- Once you receive confirmation that you've been linked to Office Ally, you **MUST** contact Office Ally at (360) 975-7000 Option 1 and let us know **BEFORE** you submit claims electronically.

HOW DO I ENROLL TO RECEIVE ERA'S?

- There is no separate form for Electronic Remittance Advice (ERA/835). Upon completion of the EDI application, you will automatically be enrolled to receive Electronic Remittance Advice. Paper remits will no longer be sent.